Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000056 : (954)842-2931 Phone : (954)842-2936 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN M&C COFFEE SHOP, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$25.00 |

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Electronic Filing Menu

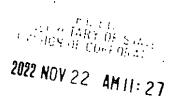
Corporate Filing Menu

Help

COVER LETTER

| TO: Registration Sec Division of Corp | tion porations | | | | | |
|--|--|--|---|--|--|--|
| | FEE SHOP, LLC | | | | | |
| SUBJECT: Name of Limited Liability Company | | | | | | |
| | Amendment and fee(s) are subr | | | | | |
| Please return all correspon | ndence concerning this matter t | to the following: | | | | |
| | PRESCIUTTI, MARCO | | | | | |
| | | Name of Person | | | | |
| | M&C COFFEE SHOP, LL | | | | | |
| F(rm/Company | | | | | | |
| 4400 NORTH FEDERAL HWY SUITE 110 | | | | | | |
| | | Address | | | | |
| | BOCA RATON, FL 33431 | i | | | | |
| | | City/State and Zip Code | | | | |
| | presciuttimarco2010@hour | nail.com to be used for future annual report notifi | cation) | | | |
| | | | | | | |
| For further information c | oncerning this matter, please co | | | | | |
| PRESCIUTTI, MARCO | | 754 707-4068 at () | | | | |
| Name o | f Person | at (at (| Telephone Number | | | |
| Enclosed is a check for the | he following amount: | | | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | | |
| Mailing Address Registration Division of C P.O. Box 632 Tallahassee, | Section Corporations 27 | Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL | porations allahassee Street, Suite 810 | | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



M&C COFFEE SHOP, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/05/2021 _ and assigned Florida document number <u>L21000197239</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address __, Florida __ City

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| Title | Name | Address | Type of Action |
|-------|-------------------|------------------------------------|----------------|
| AMBR | MAZZELLA, CANDIDA | 4400 NORTH FEDERAL HWY., SUITE 110 | □Add |
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| D. If amen | ding any other information, ente | er change(s) here: | (Attach additional sheets, | if necessary.) if NOV 22 | 5 1.72 (1) 525 (1) |
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| (If an effective Note: I | re date, if other than the date of is crive date is listed, the date must be specified the date inserted in this block does int's effective date on the Department | ic and cannot be prior to not meet the applicabl | date of filing or more than 90 d te statutory filing requireme | _ (optional) ays after filing.) Pursuant to 6 ents, this date will not be I | 505.0207 (3)(b) isted as the |
| If the record record is file | specifies a delayed effective date, bu d. | t not an effective time | e, at 12:01 a.m. on the earlie | er of: (b) The 90th day a | fter the |
| Dated _ | 1/18 | | | | |
| | Mari | co Prescietti | red representative of a membe | . <u></u> | |
| | | of a member or authoriz | red representative of a membe | r | |
| | PRESCIUTTI, MARCO | Typed or printed | name of signee | | |

Filing Fee: \$25.00